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FIG. 1

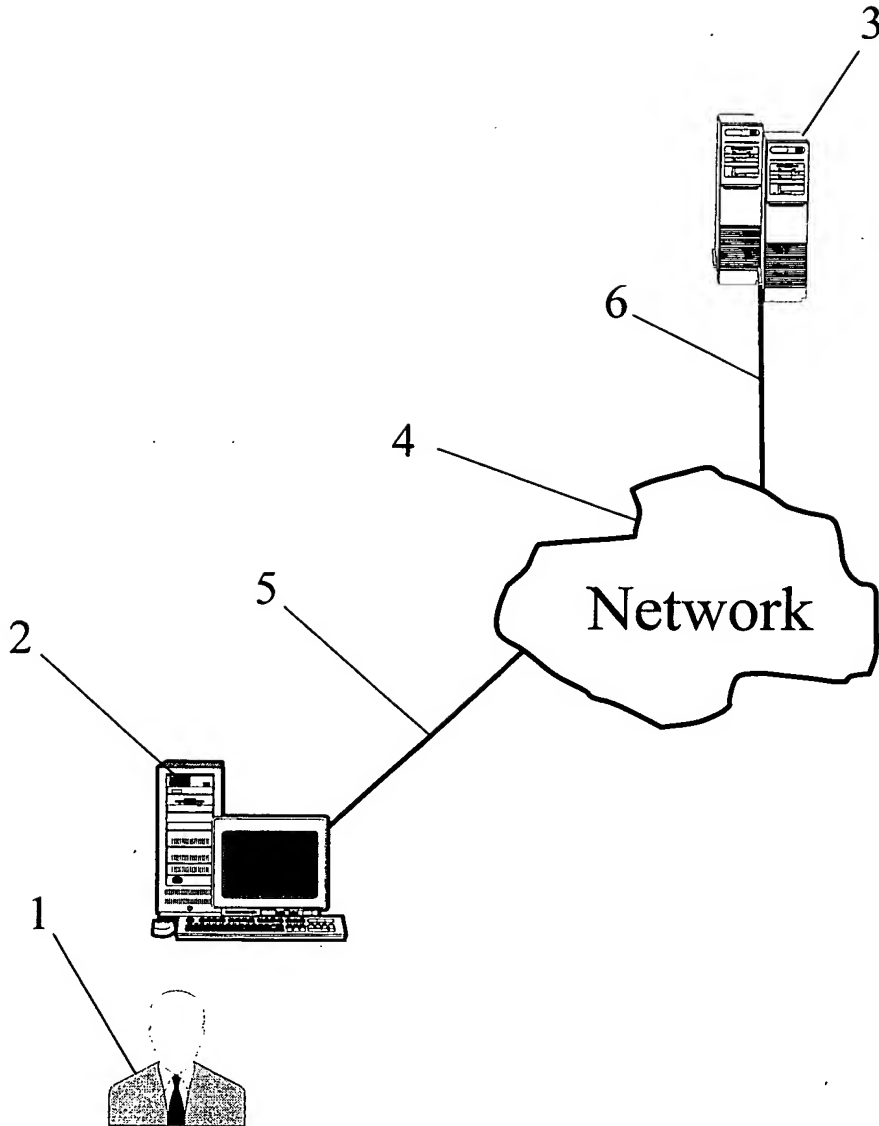
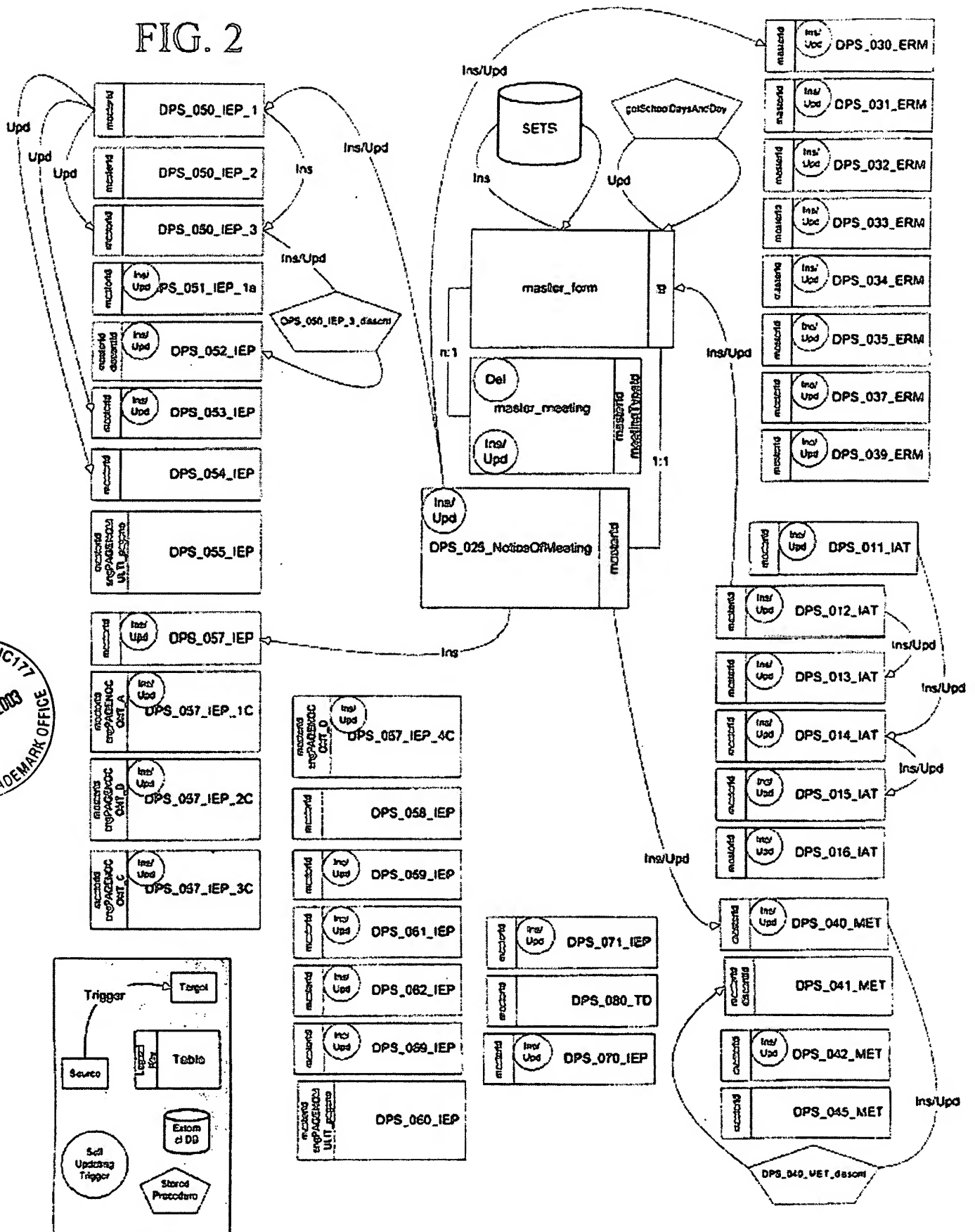


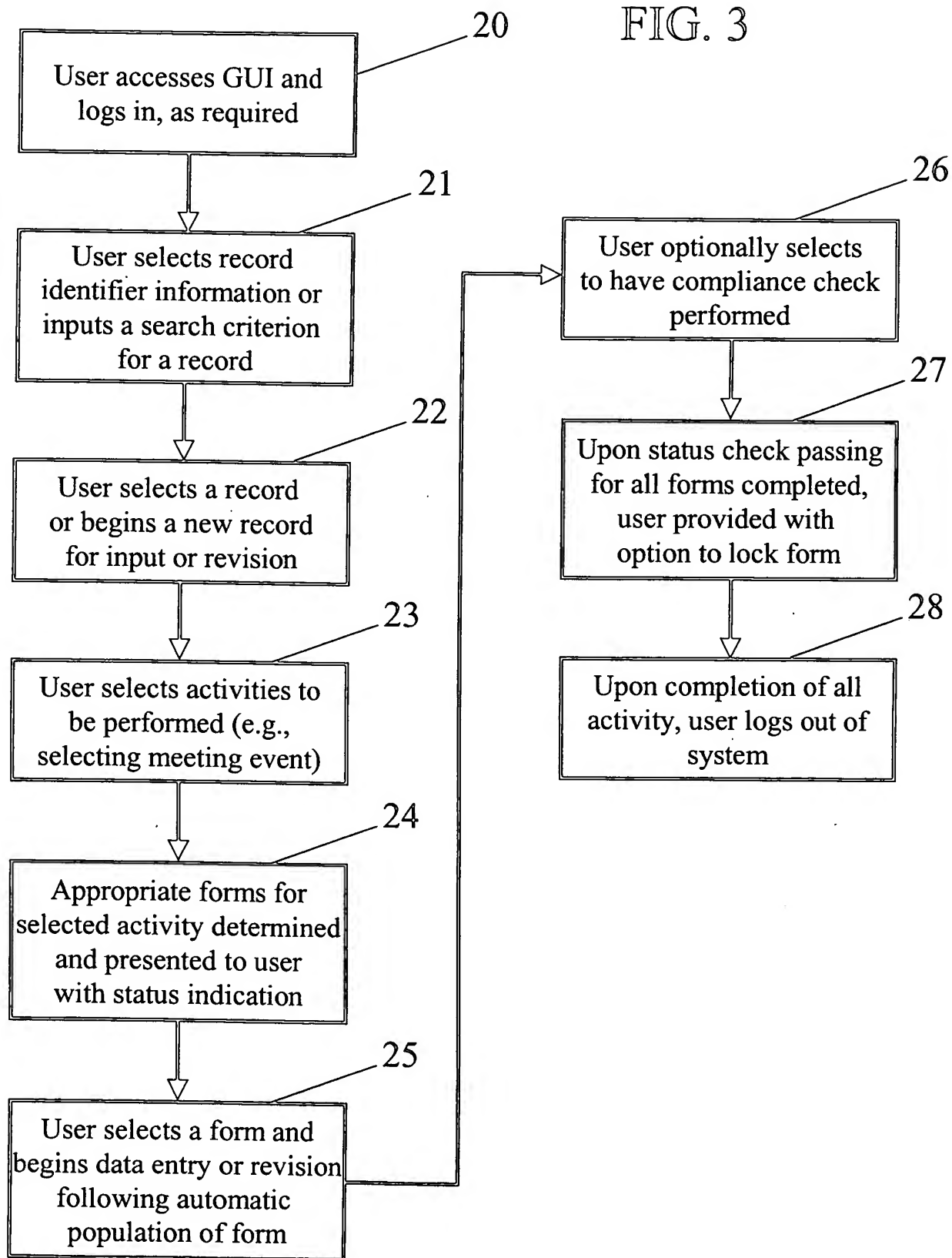
FIG. 2



01PE JC177
DEC 03 2003
PATENT & TRADEMARK OFFICE



FIG. 3



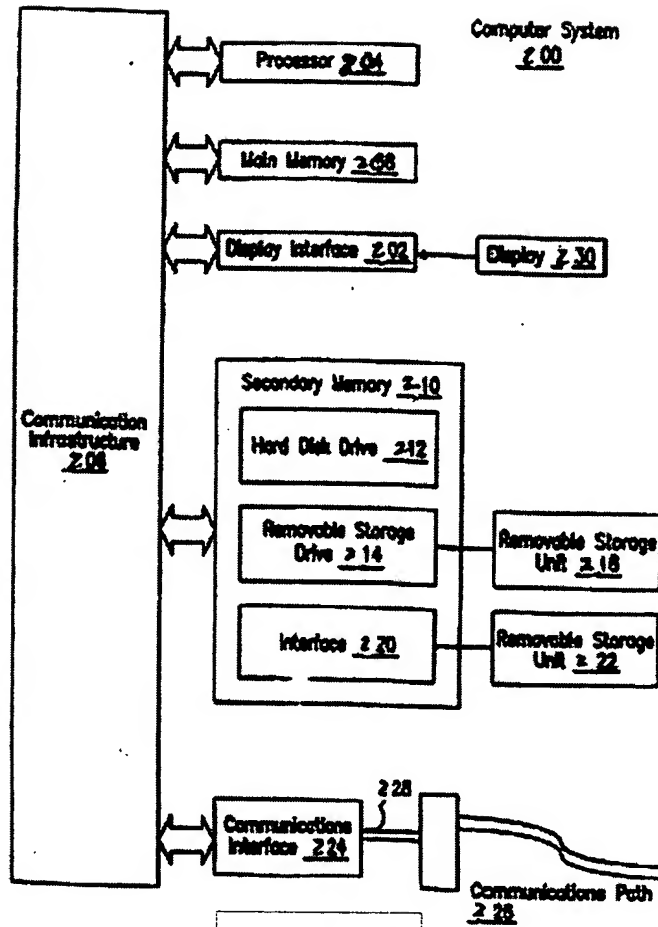


FIG. 4

FIG. 5

Green shaded fields

Last Updated By: WINSTON-SALEM/FORSYTH COUNTY SCHOOLS

Student Name: A A Student ID#:

Duration: Special Education and Related Services: From To

C. Continuum of Alternative Placements: Check the alternative placements considered by the committee, and circle the decision reached.

<input type="checkbox"/> Regular - 80% or more of the day with non-disabled peers	<input type="checkbox"/> Private Separate School
<input type="checkbox"/> Resource - 40% - 79% of day with non-disabled peers	<input type="checkbox"/> Public Residential
<input type="checkbox"/> Separate - 39% or less of the day with non-disabled peers	<input type="checkbox"/> Private Residential
<input type="checkbox"/> Public Separate School	<input type="checkbox"/> Home/Hospital

☐ Change in placement

☐ Modified Day

D. If the student will be removed for any part of the day (regular class, extracurricular, non-academic activities) or 4 Period HS from students without disabilities, explain why:

VI. Explain how and when parents will be informed of the student's progress toward annual goals:

Quarterly Progress Reports

VII. Extended School Year Status

☐ Is not eligible for ESY

☐ Is eligible for ESY

☐ Eligibility is under consideration and will be determined by

VIII. IEP Team. The following were present and participated in the development and writing of the IEP.

Signature	Position	Date
	Parent	
	IEA Representative	
	Regular Education Teacher	
	EC Teacher	

IX. IEP Addendum Team Committee. The following were present and participated in the development and writing of the addendum. Purpose:

Signature	Position	Date
	Parent	
	IEA Representative	
	Regular Education Teacher	
	EC Teacher	

X. Reevaluation

This IEP was reviewed at reevaluation and was found to be appropriate. An annual review of this IEP will be concluded on or before

Signature	Position	Date
	Parent	
	IEA Representative	
	Regular Education Teacher	
	EC Teacher	

Save and Print Save Reset

Yellow shaded fields

Purple/salmon shaded fields



FIG. 6

Changes
to yellow
upon
completion



Last Updated By :		DRAFT
WINSTON-SALEM/FORSYTH COUNTY SCHOOLS		DEC 4 (4 of 4)
Student Name	A A	Student ID# 07/29/2002
Duration: Special Education and Related Services: From _____ To _____		

C. Continuum of Alternative Placements: Check the alternative placements considered by the committee, and circle the decision reached:

<input checked="" type="checkbox"/> Regular - 80% or more of the day with non-disabled peers	<input type="checkbox"/> Private Separate School	<input type="checkbox"/> Change in placement
<input type="checkbox"/> Resource - 40% - 79% of day with non-disabled peers	<input type="checkbox"/> Public Residential	<input type="checkbox"/> Modified Day
<input type="checkbox"/> Separate - 39% or less of the day with non-disabled peers	<input type="checkbox"/> Private Residential	
<input type="checkbox"/> Public Separate School	<input type="checkbox"/> Home/Hospital	

D. If the student will be removed for any part of the day (regular class, extracurricular, non-academic activities) or 4 Period HS from students without disabilities, explain why:

VI. Explain how and when parents will be informed of the student's progress toward annual goals:
Quarterly Progress Reports

VII. Extended School Year Status

☐ Is not eligible for ESY

☐ Is eligible for ESY

☐ Eligibility is under consideration and will be determined by _____

VIII. IEP Team. The following were present and participated in the development and writing of the IEP.

Signature	Position	Date
_____	Parent	_____
_____	IEA Representative	12/04/2003
_____	Regular Education Teacher	_____
_____	EC Teacher	_____

IX. IEP Addendum Team Committee. The following were present and participated in the development and writing of the addendum. Purpose: _____

Signature	Position	Date
_____	Parent	_____
_____	IEA Representative	_____
_____	Regular Education Teacher	_____
_____	EC Teacher	_____

X. Reevaluation

This IEP was reviewed at reevaluation and was found to be appropriate. An annual review of this IEP will be concluded on or before _____

Signature	Position	Date
_____	Parent	_____
_____	IEA Representative	_____
_____	Regular Education Teacher	_____
_____	EC Teacher	_____

Save and Print
Save
Reset

FIG. 7

All
Yellow



Last Updated By:		DRAFT	
WINSTON-SALEM/FORSYTH COUNTY SCHOOLS		DEC 4 (4 of 4)	
Student Name: _____ A _____ A _____	Student ID# _____	07/29/2002	
Duration: Special Education and Related Services: From _____ To _____			

C. Continuum of Alternative Placements: Check the alternative placements considered by the committee, and circle the decision reached.

<input checked="" type="checkbox"/> Regular - 80% or more of the day with non-disabled peers	<input type="checkbox"/> Private Separate School	Change in placement
<input type="checkbox"/> Resource - 40% - 79% of day with non-disabled peers	<input type="checkbox"/> Public Residential	
<input checked="" type="checkbox"/> Separate - 39% or less of the day with non-disabled peers	<input checked="" type="checkbox"/> Private Residential	Modified Day
<input type="checkbox"/> Public Separate School	<input type="checkbox"/> Home/Hospital	

D. If the student will be removed for any part of the day (regular class, extracurricular, non-academic activities) or 4 Period HS from students without disabilities, explain why:

VI. Explain how and when parents will be informed of the student's progress toward annual goals:
Quarterly Progress Reports

VII. Extended School Year Status
☐ is not eligible for ESY
☐ is eligible for ESY
☒ Eligibility is under consideration and will be determined by _____

VIII. IEP Team. The following were present and participated in the development and writing of the IEP.

Signature	Position	Date
_____	Parent	_____
_____	LEA Representative	_____
_____	Regular Education Teacher	_____
_____	EC Teacher	_____

IX. IEP Addendum Team Committee. The following were present and participated in the development and writing of the addendum. Purpose: _____

Signature	Position	Date
_____	Parent	_____
_____	LEA Representative	_____
_____	Regular Education Teacher	_____
_____	EC Teacher	_____

X. Reevaluation
 This IEP was reviewed at reevaluation and was found to be appropriate. An annual review of this IEP will be concluded on or before _____

Signature	Position	Date
_____	Parent	_____
_____	LEA Representative	_____
_____	Regular Education Teacher	_____
_____	EC Teacher	_____

Save and Print
Save
Reset

Purple/
salmon
shaded
field



WSSEIS Farm

Program

ica Neighborhood

152

154

User name: 4glsupport

Password:

Domain: wssels

☐ Save Password

OK Cancel

FIG. 8

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Welcome to EZ Compliance Forms

by 4GL School Solutions Inc.

User Name : 162

Password : 164

166

FIG. 9

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SETS Form Writer by JCL - Microsoft Internet Explorer

Admin | Return to last search | Select new student | Logout

SETS: EZ Compliance - Forms Writer

Student Search Criteria

First Name:

Last Name:

DOB:

SSN:

Student ID:

IEP School: ALL SCHOOLS

Search

182

Done Internet

FIG. 11

Admin | [Return to last search](#) | [Select new student](#) | [Logout](#)

Student ID	SSN
356139	242553730
979224	239752380
979495	239751009
378279	237670085
468009	241492318
632992	241414427
978143	240579304
193370	242497034
458928	244731322
218187	244558401

FIG. 12

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention

Meeting | Event
Student Profile

List
Add Meeting / Event

Filter
show all

Date	Meeting / Event Type	Forms	Status
06/	<div> ERM Initial MET Initial IEPT Initial IEPT Post-Initial ERM Reveal (3yr) MET Reveal (3yr) IEPT Reveal (3yr) </div>		Draft
05/16/2002	MET Initial		Draft
05/16/2002	IEPT Initial		Draft

Start
ZoneAlarm
Local Intranet
3:09 PM

EZ FORMS - Citrix ICA Client

SETS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799

Admin | Return to last search | Select new student | Logout

Special Ed

Meeting Events

Details

Intervention

Student Profile

Compliance

Check

06/13/2002 [Draft]

EXEC ListMeetingForm 15,1,0, 1

ERM Initial

Form Name
Form Rule
Form Status
Delete Event

☒ Notice Of Meeting (06/13/2002) ☐ Lock

Special Education Referral/Evaluation Review/Consent Form

Special Education Direct Referral/ Consent Form

* Request For Records

* Release Of Information

* Evaluation Extension

IEPT Post-Initial

IEPT Report Pages 1 & 2

IEPT Report Pages 2 & 4

IEPT Report Pages 5 & 6

☐ Required

☐ Optional

☐ Optional

☒ Required

☒ Required

☒ Required

Compliant

blank form

blank form

Non-Compliant

Non-Compliant

Non-Compliant

blank form

blank form

blank form

Delete Event

Delete Event

Delete Event

Delete Event

Delete Event

Delete Event

** ADD EVENT TO THIS MEETING

Local intranet

FIG. 14

STIS form Writer by stat. - Microsoft Internet Explorer
 Admin | Return to last search | Select new students | Logout
© 2000 4GL School Solutions, Inc.

Student: BUGS BUNNY ID: 99999999
 222

Special Ed
 Student Profile

Meeting / Event
 Add Meeting / Event

All Events | All IE's | Filter
 Add Meeting / Event

Date	Meeting / Event Type	Forms	Status
04/05/2002	Additional Testing Summary	DEC3, DEC5	Draft
04/01/2002	Addendum	DEC4, Transition, BIP	
12/20/2001	Addendum	DEC4, Transition, BIP	Released
12/17/2001	Annual Review	DEC4, Transition, BIP	Released

FIG. 15

: EZ FORMS - Citrix ICA Client
 SEIS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799 Admin | [Return to last search](#) | [Select new student](#) | [Logout](#)

Special Ed Intervention

Meetings / Events Student Profile

First Name: SEVEN Last Name: FORMS Student ID: 70799 DOB: 01/01/1993 Grade: 04 Sex: F	MI: SSN: AGE: Race: U
Address: City: State:	Zip:
ESY: Category: Related Services: IEP Start Date: Last Re-Eval Date:	Amount of Service: Placement: IEP End Date:
Attending School Number: 9999 Attending School Name: Temporary School (Training)	

Done Local intranet

FIG. 16

Admin | [Return to last search](#) | [Select new student](#) | [Logout](#)

242

244

246

Student ID	SSN
465586	448654998
46456	896559798
4544585	454868498
9999999	165248955
12345	212908720
4646589	848465987
4656464	513152155
45548978	465484564
4645864	465858512
999689	465696465
465645	465585345
46565686	465888568

FIG. 17

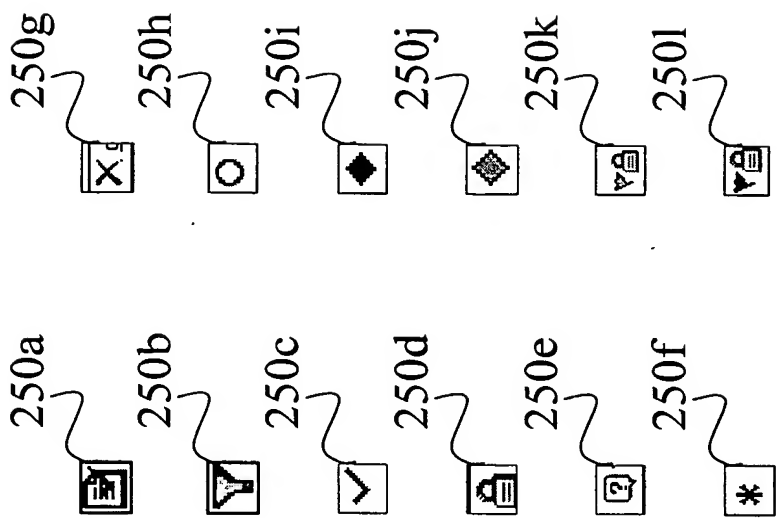


FIG. 18

EZ FORMS - Citrix ICA Client
SETS Form Writer by iGL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention
Student Profile

Meeting / Event List
Add Meeting / Event

Filter
show all

Date	Meeting / Event Type	Forms	Status
05/16/2002	MET Initial		Draft
05/16/2002	IEPT Initial		Draft
05/10/2002	ERM Initial IEPT Post-Initial ERM Reeval (3yr) MET Reeval (3yr) IEPT Reeval (3yr)		Draft

Local intranet

262

FIG. 19

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer

Admin | Return to last search | Select new student | Logout

Student: SEVEN FORMS ID: 70799

Special Ed
Intervention

Meeting Event
Student Profile

Add Meeting / Event

Filter show all

	Meeting / Event Type	Forms	Status
ERM Initial	MET Initial		Draft
05/ MET Initial	IEPT Initial		Draft
05/ IEPT Post-Initial	ERM Initial		Draft
ERM Reveal (3yr)	IEPT Post-Initial		
MET Reveal (3yr)	ERM Reveal (3yr)		
IEPT Reveal (3yr)	MET Reveal (3yr)		
IEPT Reveal (3yr)	IEPT Reveal (3yr)		

272

Local intranet

FIG. 20 260

SEVEN FORMS - Citrix ICA Client

SEIS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799

Return to last search | Select new student | Logout

05/16/2002 MET Initial

124x1 of 1

Done

5/13/2002 8:35 am

DRAFT

Detroit Public Schools

Department of Student Support Services

NOTICE OF MEETING

Date: 05/13/2002

Last Updated By: dpgquest

Tom

Name

7777

Address

Detroit

City

MI

66666

State

zip code

Forms

Student: SEVEN

DOB: 01/01/1993

ID#: 196978

Grade:

School:

Gender:

Clinic #

Program:

FORMS

Dear Mr. Forms

You are invited to a meeting on: 05/16/2002, Thu at 9:00 pm

Location: SCB

Address: 11111

City: Detroit

State: MI

zip code: 44444

Phone: 555-1212

☐ Invite the student.

This meeting will be:

☐ An Evaluation Review Meeting to review existing data and develop an evaluation plan in order to determine:
☐ if your child needs special education programs/services. Your input is important and your consent is required.

Is this a direct referral? ☐ Yes ☐ No

282

FIG. 21 280

SETS Form Writer By AEL - Microsoft Internet Explorer

Admin | Return to last search | Select new student | Logout

SETS: EZ Compliance - Forms Writer

Student Search Criteria

First Name: _____

Last Name: smith

DOB: _____

SSN: _____

Student ID: _____

IEP School: ALL SCHOOLS

Search

292

294

296

FIG. 22

290

[Admin | Return to last search | Select new student | Logout](#)

THE

[illegible]

Student Name	Student ID	SSN
1 SMITH, AARON	356139	242553230
2 SMITH, ALEX	979224	239752380
3 SMITH, ALEXANDER	979495	239751009
4 SMITH, ALEXANDER	378279	237670085
5 SMITH, ALLEN	468002	241492318
6 SMITH, ALONZO	832992	241414427
7 SMITH, AMANDA	978143	240579304
8 SMITH, AMBER	193370	242492034
9 SMITH, ANDREW	458928	244731322
10 SMITH, ANNA	218187	244558401
11 SMITH, ANNA	979221	238754076
12 SMITH, ANTONIO	204137	243474316
13 SMITH, ANTONIO	951503	246877033
14 SMITH, APRIL	560101	237577389
15 SMITH, AUSTIN	959867	238834363
16 SMITH, BELVIN	128089	243556315
17 SMITH, BENJAMIN	325749	246532758
18 SMITH, BERNARD	959812	340535096
19 SMITH, BOBBIE	598367	81682358
20 SMITH, BOBBY	193236	242433510

[illegible]

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention
Student Profile

Meeting | Event List
Add Meeting / Event

Filter
show all

Date	Meeting / Event Type	Forms	Status
06/13/2002	ERM Initial IEPT Post-Initial ERM Reeval (3yr) MET Reeval (3yr) IEPT Reeval (3yr)		Draft
05/16/2002	MET Initial		Draft
05/16/2002	IEPT Initial		Draft

Done
Local intranet

FIG. 24

EZ FORMS - Citrix ICA Client
SETS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention

Meeting Events
Student Profile

* Select one stand-alone event -or- multiple events which take place on the same date, then click [CREATE](#)

Meeting / Event Type	Forms
<input checked="" type="checkbox"/> ERM Initial	
<input type="checkbox"/> MET Initial	322
<input type="checkbox"/> IEPT Initial	
<input type="checkbox"/> IEPT Post-Initial	324
<input type="checkbox"/> ERM Reeval (3yr)	
<input type="checkbox"/> MET Reeval (3yr)	
<input type="checkbox"/> IEPT Reeval (3yr)	

Done
Local intranet

FIG. 25

EZ FORMS - Citrix ICA Client
SEIS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention

Meeting Events
Student Profile

** Select one stand-alone event -or- multiple events which take place on the same date, then click CREATE

Meeting / Event Type	Forms
<input checked="" type="checkbox"/> ERM Initial	334
<input type="checkbox"/> MET Initial	
<input type="checkbox"/> IEPT Initial	
<input type="checkbox"/> IEPT Post-Initial	
<input type="checkbox"/> ERM Reeval (3yr)	
<input type="checkbox"/> MET Reeval (3yr)	
<input type="checkbox"/> IEPT Reeval (3yr)	

Done
Local Intranet

332

FIG. 26

EZ FORMS - Citrix ICA Client
SEIS Form Writer by IGL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention
Student Profile

Meeting Events
Details
Compliance
Check

05/13/2002 [Draft]
EXEC ListMeetingForm 45,1,0, 1
ERM Initial

Form Name
Form Rule
Form Status
Delete Event

New Notice Of Meeting
Required
blank form

Special Education Referral/Evaluation Review/Consent Form
blank form

Special Education Direct Referral/ Consent Form
blank form

Request For Records
Optional
blank form

Release Of Information
Optional
blank form

Evaluation Extension
Optional
blank form

To get access to the applicable forms please complete and lock the Notice of Meeting.

Done
Local intranet

352

FIG. 28

: EZ FORMS - Citrix ICA Client
SEIS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention

Meeting Events
Student Profile

ERM Initial 05/13/2002 [Draft]

Select an event which OCCURS AT THE SAME TIME AS THE OTHER EVENTS(S) FOR THIS DATE, then click CREATE.

To create a stand-alone event, go back to the [Meeting | Event] list

Meeting / Event Type	Forms
ERM Initial	
MET Initial	
IEPT Initial	
IEPT Post-Initial	
ERM Reeval (3yr)	
MET Reeval (3yr)	
IEPT Reeval (3yr)	

Done Local Intranet

362

FIG. 29

EZ FORMS - Citrix ICA Client
SEIS Form Writer by JGL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention

Meeting Events
Student Profile

Details
Compliance: ☐ Check

05/13/2002 [Draft]

** ADD EVENT TO THIS MEETING

EXEC ListMeetingForm 45,1,0, 1
ERM Initial

Form Name	Form Rule	Form Status	Delete Event
New Notice Of Meeting	Required	blank form	
Special Education Referral/Evaluation Review/Consent Form		blank form	
Special Education Direct Referral/ Consent Form		blank form	
Request For Records	Optional	blank form	
Release Of Information	Optional	blank form	
Evaluation Extension	Optional	blank form	
MET Initial			Delete Event
MET Report	Required	blank form	
Summary Reports	Required	blank form	
Evaluation Request	Required	blank form	

Local intranet

FIG. 30

: EZ FORMS - Citrix ICA Client
 SETS Form Writer by 4GL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799 Admin | Return to last search | Select new student | Logout

Special Ed Intervention Student Profile

Meeting Events Details Compliance: ☐ Check

05/13/2002 [Draft] ** ADD EVENT TO THIS MEETING

EXEC ListMeetingForm 45,1,0, 1
 ERM Initial

Form Name	Form Rule	Form Status	Delete Event
New Notice Of Meeting	◆ Required	blank form	
Special Education Referral/Evaluation Review/Consent Form		blank form	
Special Education Direct Referral/ Consent Form		blank form	
Request For Records	○ Optional	blank form	
Release Of Information	○ Optional	blank form	
Evaluation Extension	○ Optional	blank form	
MET Initial			Delete Event
MET Report	◆ Required	blank form	
Summary Reports	◆ Required	blank form	
Evaluation Request	◆ Required	blank form	

Local Intranet

FIG. 31

EZ FORMS - Citrix ICA Client

SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Meeting Events
Student Profile

Details
Compliance: ☐ Check

05/13/2002 [Draft]
ADD EVENT TO THIS MEETING

EXEC ListMeetingForm 45,1,0,1
Delete Event

Form Name
Form Status

New Notice Of Meeting
blank form

Special Education Referral/Evaluation Review/Consent Form
blank form

Special Education Direct Referral/ Consent Form
blank form

Request For Records
blank form

Release Of Information
blank form

Evaluation Extension
blank form

MET Initial
Delete Event

MET Report
blank form

Summary Reports
blank form

Evaluation Request
blank form

Microsoft Internet Explorer
Delete Meeting - MET Initial ?
OK Cancel

javascript:doSubmit(99,75,MET Initial);
Local intranet

FIG. 32

EZ FORMS - Citrix ICA Client
SEIS Form Writer by JGL - Microsoft Internet Explorer

Student: SEVEN FORMS ID: 70799
Admin | Return to last search | Select new student | Logout

Special Ed
Intervention
Student Profile

Meeting Events
Details
Compliance: ☐ Check

05/13/2002 [Draft]
EXEC ListMeetingForm 45,1,0,1
ERM Initial

Form Name	Form Rule	Form Status	Delete Event
New Notice Of Meeting	Required	blank form	
Special Education Referral/Evaluation Review/Consent Form		blank form	
Special Education Direct Referral/ Consent Form		blank form	
Request For Records	Optional	blank form	
Release Of Information	Optional	blank form	
Evaluation Extension	Optional	blank form	

Done
Local Intranet

FIG. 33 400

SETS Form Writer by JGL - Microsoft Internet Explorer

Student: EIGHT FORMS ID: 80899

Admin | Return to last search | Select new student | Logout

* Special Ed Intervention Student Profile

Meeting Events Details Compliance Check

05/30/2002 (Draft [X])

EXEC ListMeetingForm 48,1,0,1

ERM Initial

Form Name	Form Rule	Form Status	Delete Event
Notice Of Meeting (05/14/2002)	Required	Released	
Notice Of Meeting (05/30/2002)	Required	Released	414
New Notice Of Meeting	Required	blank form	
Special Education Referral/Evaluation Review/Consent Form	Required	Compliant	
Request For Records	Optional	Compliant	X delete
Release Of Information	Optional	Compliant	X delete
Evaluation Extension	Optional	Compliant	X delete

To get access to the applicable forms please complete and lock the Notice of Meeting.

Local intranet

FIG. 34

410


412

Student: EIGHT FORMS ID: 80899

* Special Ed		Intervention
<div> <div>Meeting</div> <div>Events</div> </div> <div>Details</div>		Student Profile
		Compliance <input type="checkbox"/> Check

06/10/2002 [Draft 5] 442

Check: PASSED 

 Clear Window

EXEC ListMeetingForm 51,1,0, 1

IEPT Post-Initial

Delete Event

	Form Name	Form Rule	Form Status
✓	<u>Notice Of Meeting (06/10/2002)</u> <input type="checkbox"/> Lock	◆ Required	Compliant
✓	<u>IEPT Report Pages 1 & 2</u>	◆ Required	Compliant
✓	<u>IEPT Report Pages 2 & 4</u>	◆ Required	Compliant
✓	<u>IEPT Report Pages 5 & 6</u>	◆ Required	Compliant

FIG. 37

SEIS Form Writer by 4GL - Microsoft Internet Explorer

Admin | [Return to last search](#) | [Select new student](#) | [Logout](#)

Student: BUGS BUNNY ID: 99999999

Special Ed

Meeting Events

Student Profile

Details

Compliance: ☐ Check

03/25/2002 [Draft]

Check: PASSED ☐ Lock

Clear Window

452

Functional Behavior Assessment (only)

Delete Event

	Form Name	Form Rule	Form Status
	DEC Prior Notice/Invitation (03/25/2002)	<input type="radio"/> Optional	Released
	New DEC Prior Notice/Invitation		blank form
<input checked="" type="checkbox"/>	Functional Behavior Assessment	<input checked="" type="radio"/> Required	Compliant

FIG. 38

Student: AMY FORMS ID: 4566000
Admin | Return to last search | Select new student | Logout

Meeting Events
Student Profile
Details

04/08/2002 [Released]
474

Re-Evaluation Prep			
Form Name	Form Rule	Form Status	
DEC Prior Notice/Invitation (04/08/2002)	Required	Released	
DEC 3 RAT	Required	Released	
DEC 2	Required	Released	
* SETS Meeting Datasheet	Required	Non-Compliant	
Re-Evaluation			
DEC 3	Required	Released	
DEC 5 Prior Notice	Required	Released	
Annual Review			
DEC 4 Page 1 - Special Factors	Required	Released	
DEC 4 Page 2 - Goal Page #1 - Money	Optional	Released	
DEC 4 Page 3 - Service Delivery	Required	Released	
DEC 4 Page 4 - Signature	Required	Released	
Transition Statement / Plan	Required	Released	
Transition Plan Page 2	Required	Released	
Progress Report	Required	blank form	
* SETS IEP Datasheet	Required	Non-Compliant	

FIG. 40

470

SEIS Form Writer by 4GL - Microsoft Internet Explorer

Admin | [Return to last search](#) | [Select new student](#) | [Logout](#)

Student: EIGHT FORMS ID: 80899

* Special Ed

Intervention

Meeting Events

Student Profile

Details

Compliance: ☐ Check

06/10/2002 [Draft]

Check: PASSED ☐ Lock

Clear Window

EXEC ListMeetingForm 51,1,0,1
IEPT Post-Initial

Delete Event

Form Name	Form Rule	Form Status
✓ Notice Of Meeting (06/10/2002) <input type="checkbox"/> Lock	◆ Required	Compliant
✓ IEPT Report Pages 1 & 2	◆ Required	Compliant
✓ IEPT Report Pages 2 & 4	◆ Required	Compliant
✓ IEPT Report Pages 5 & 6	◆ Required	Compliant

FIG. 41

Compliance <input type="checkbox"/> Check

▶ * [ADD EVENT TO THIS MEETING](#)

FIG. 42



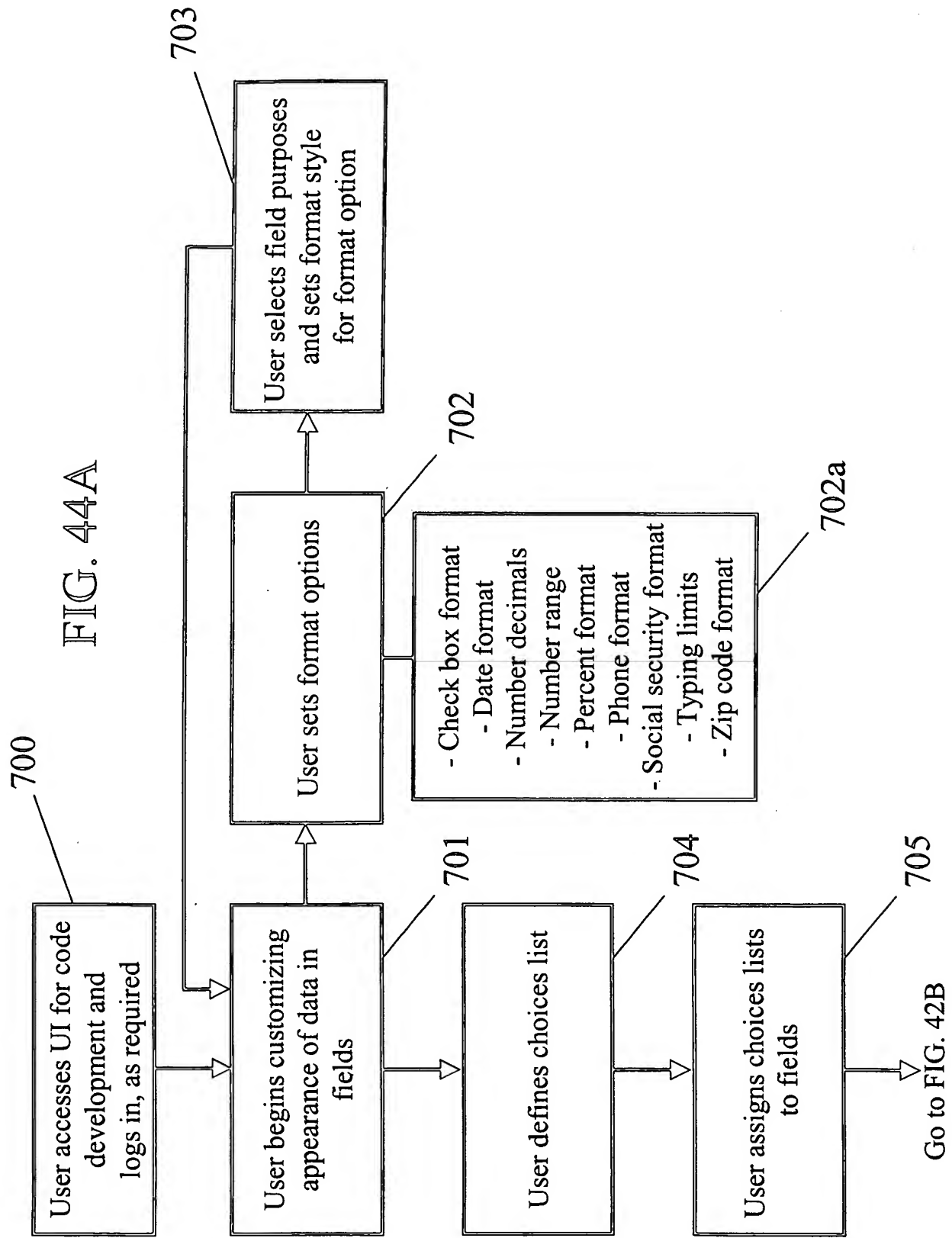
Specialized			
Meetings/Events		Student Profile	Access Log
Details			
06/30/2003 [Draft ]			
<p>Check: FAILED</p> <ol style="list-style-type: none"> 1. PK DEC 3 is not compliant. 2. DEC Prior Notice/Invitation - must be locked individually before locking entire set. 3. PK DEC 4 Page 3 is not compliant. 4. PK DEC 4 Page 4 - Signature is not compliant. 5. BIP - Behavioral Intervention Plan is not compliant. 6. DEC 5 Prior Notice is not compliant. 7. DEC 6 is not compliant. 8. DEC Prior Notice/Invitation - must be locked individually before locking entire set. 9. Because you selected [Student requires assistive technology devices] on DEC4_1. ASSISTIVE TECHNOLOGY must be reflected on a Goal Page. [DEC4_2] 10. Because you selected [Student has special Communication needs in DEC4_1]. You must fill out a COMMUNICATION goal page. [DEC4_2] 11. Because you selected [Student has behavioral problems] in DEC4 Page 1. You are required to fill out a BIP - Behavioral Intervention Plan. [BIP] 12. Because you selected [Student impedes the learning of others] in DEC4_1. You must fill out a BEHAVIOR Goal Page. [DEC4_2] 13. DEC 4 Page 2 - Goal Page #1 for Behavior is not complete. <p> Clear Window</p>			

FIG. 43



From FIG. 42A

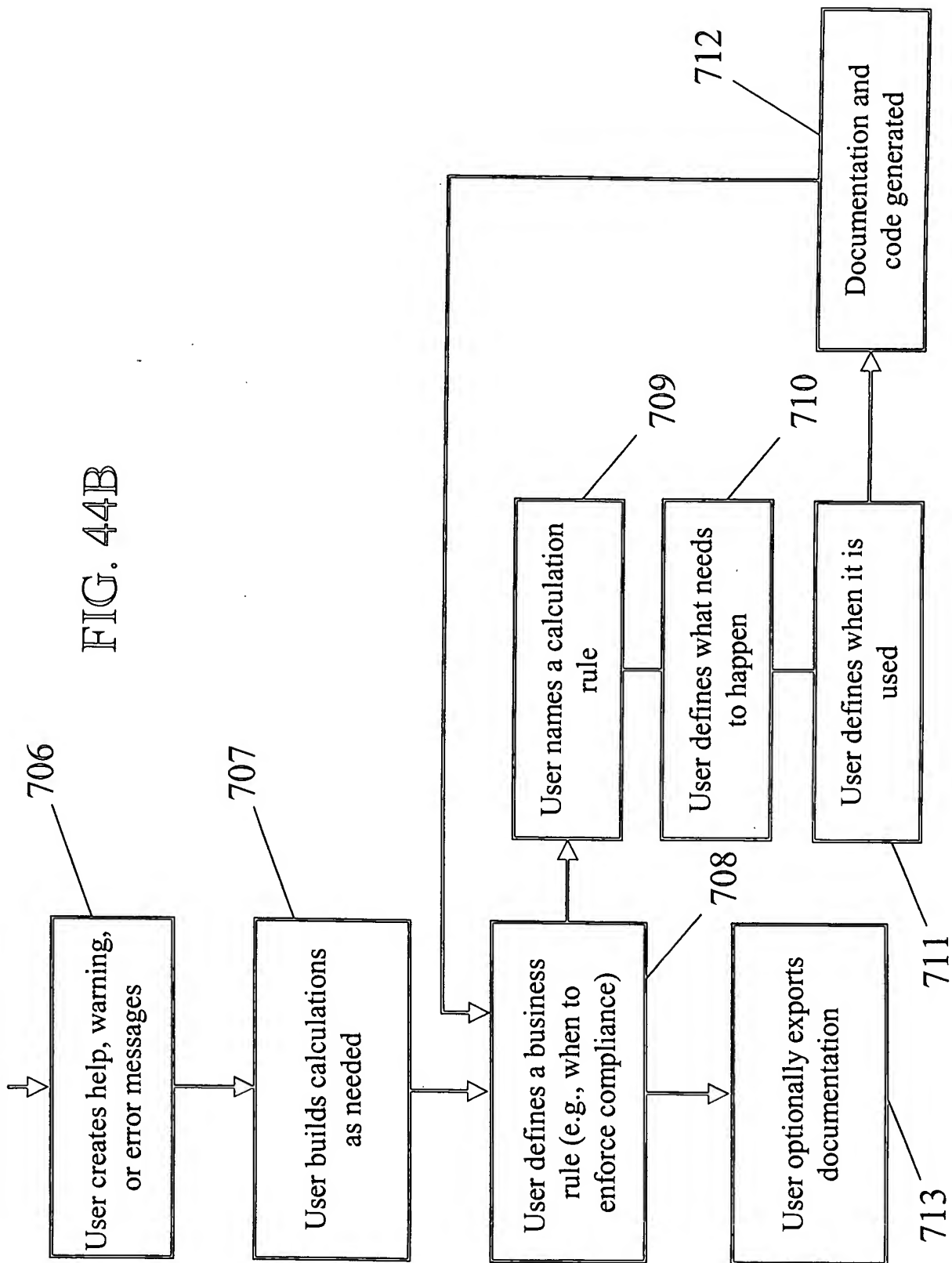


FIG. 45

820

Click Here to build form level compliance

822

823

825

827

Click Here to build form level compliance

Step 1: Customize appearance of data in fields

Step 2: Define Choices Lists

Step 3: Assign Choices Lists to Fields

Step 4: Create help, warning or error messages

Step 5: Build calculations as needed

Step 6: Define a Business Rule - (When to enforce compliance)

Step 7: Export Documentation

Clear the field (x)

821

FIG. 46

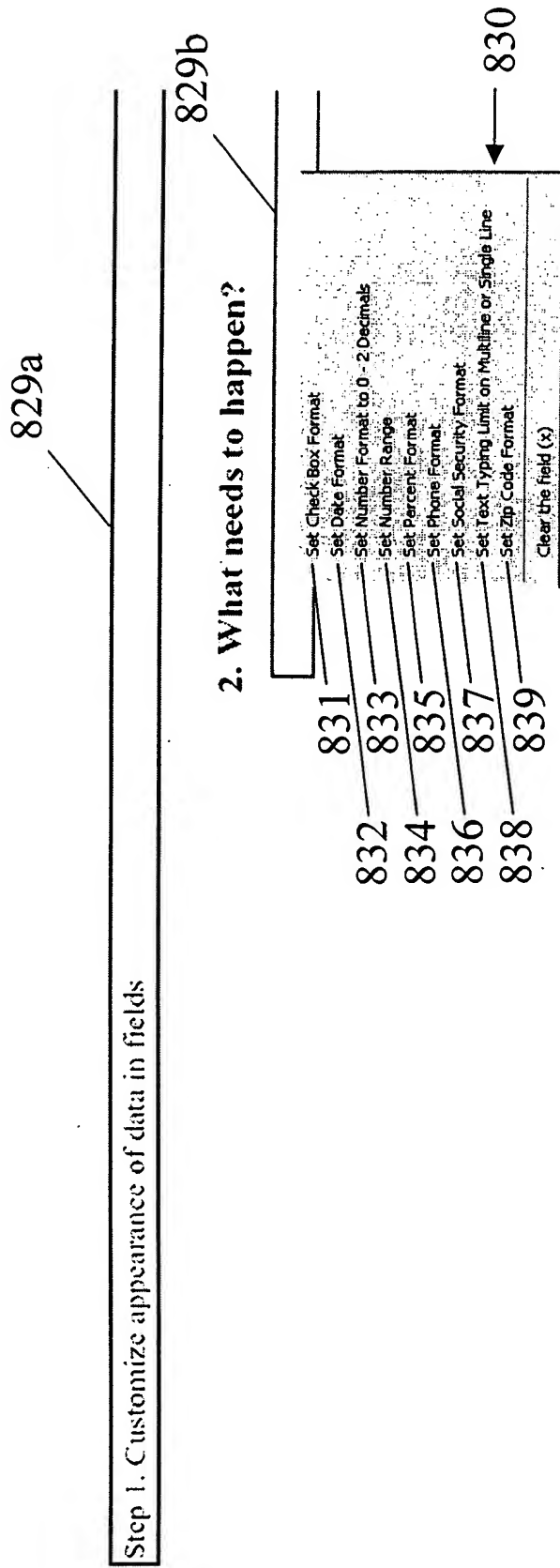


FIG. 47

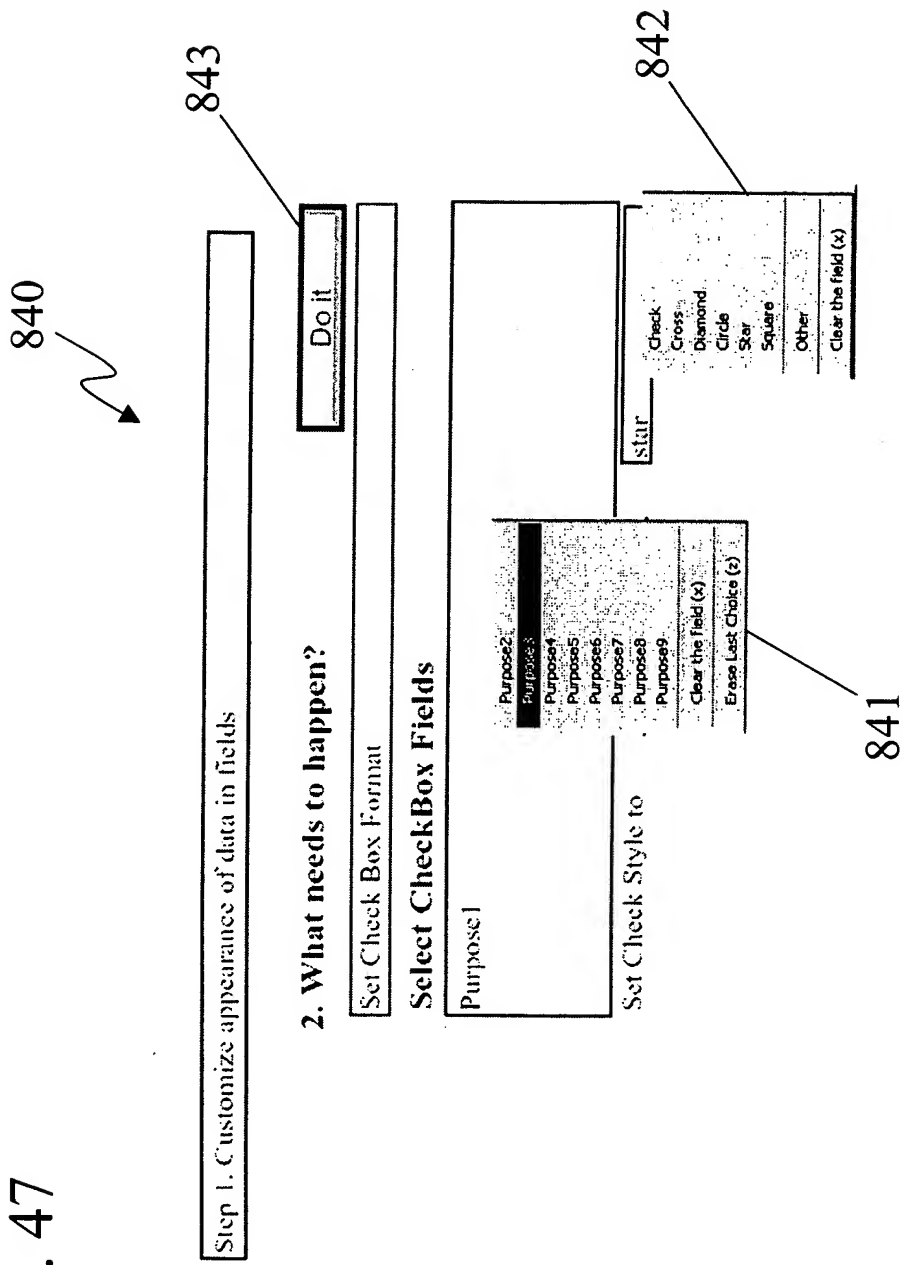




FIG. 48

850



Step 1. Customize appearance of data in fields

2. What needs to happen?

Set Date Format

Select Date Fields

Team Mtg Date

Set Date Format to

1/2001
2/2/2002
Mar 3, 2003
Apr 4, 2004 Fri
May 5, 2005 Friday
June 6, 2006
July 7, 2007 Fri
August 8, 2008 Friday
Other

851

FIG. 49

860



Step 2. Define Choices Lists

Optional: Build a Choices List

Schools

aka ChoicesList02

Meeting Reasons

Schools

Gender

Click to Name ChoicesList 04

Click to Name ChoicesList 05

Click to Name ChoicesList 06

Click to Name ChoicesList 07

Click to Name ChoicesList 08

Add or Modify List

Sort Choices Lists

Clear All Choices

Boulder High

Cherry Creek Elementary

Arapaho Middle

Rocky Mountain High

Choices Description (to Display in Popup)

Cherry Creek Elementary

Choices Value (The result that saves to the field)

School 23

Do it

Add or Modify Choice

Sort Choices

Delete Choice



FIG. 50

Step 3. Assign Choices Lists to Fields

2. What needs to happen?

Display a Popup on field(s)

Why

870 →

Using this Choices List

Freezing Reasons
Schools
Gender
Clear the field (x)

FIG. 51

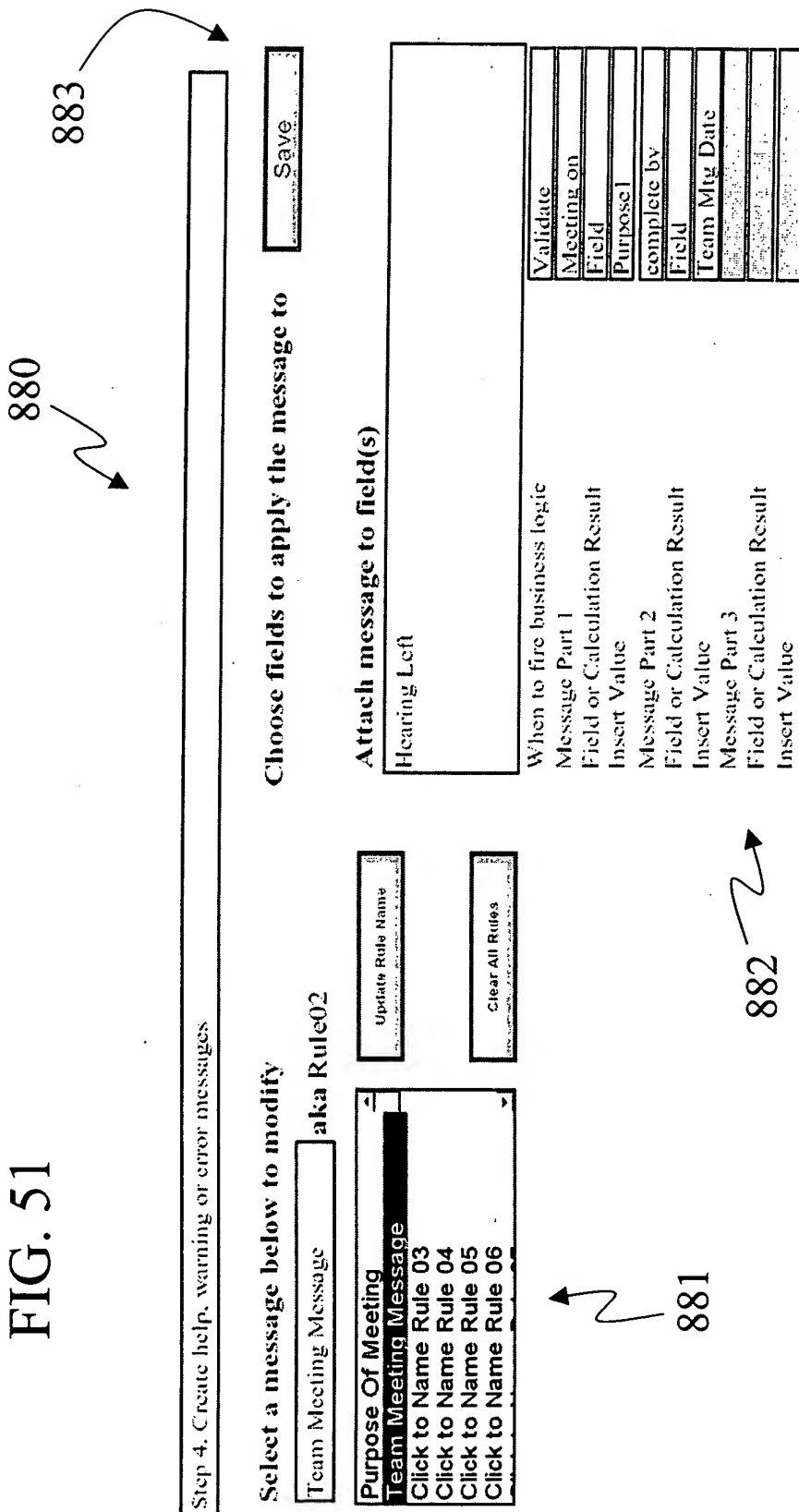


FIG. 52

890

894

Step 5. Build calculations as needed

Name a Calculation Rule Below

ReturnThe Day of The Week

aka Rule03

Purpose Of Meeting

Team Meeting Message

ReturnThe Day of The Week

Click to Name Rule 04

Click to Name Rule 05

Click to Name Rule 06

Update Rule Name

Clear All Rules

2. What needs to happen?

Save

Return the day of the week i.e. Monday for a given date

Add or Subtract Days: Weeks, Months, Years from a Date

Return the Difference Between 2 Dates as a whole number of days

Return the day of the week i.e. Monday for a given date

Is a Date Inside, Before, or After a Date Range i.e. Start to End Date

Clear the field (x)

Choose a Date

Team Mtg Date

891

893

892



Step 6. Define a Business Rule - (When to enforce compliance)

same	same
------	------

901

903

904

FIG. 54

902

2. What needs to happen?

<div>Do it</div>	
<div>Field Controls</div>	<div>Select and Set all Required Fields</div>
<div>Group to char</div>	<div>1 Field Controls itself and a target group of fields</div>
<div>Address, City Sta</div>	<div>Make Fields Change</div>
	<div>Require a number of fields in a group to be completed</div>
	<div>Clear the field (x)</div>
<div>If One Field</div>	<div>Purpose</div>
<div>Has the value</div>	<div>Invitation</div>
<div>Set One Field Color to</div>	<div>required</div>
<div>Set Group Color to</div>	<div>required</div>
<div>Set Group Visibility to</div>	<div>visible</div>
<div>Set Group Value to</div>	<div>same</div>
<div>Else Set One Field Color to</div>	<div>optional</div>
<div>And Set Group Color to</div>	<div>optional</div>
<div>And Set Group Visibility to</div>	<div>visible</div>
<div>And Set Group Value to</div>	<div>same</div>

910

FIG. 55

903

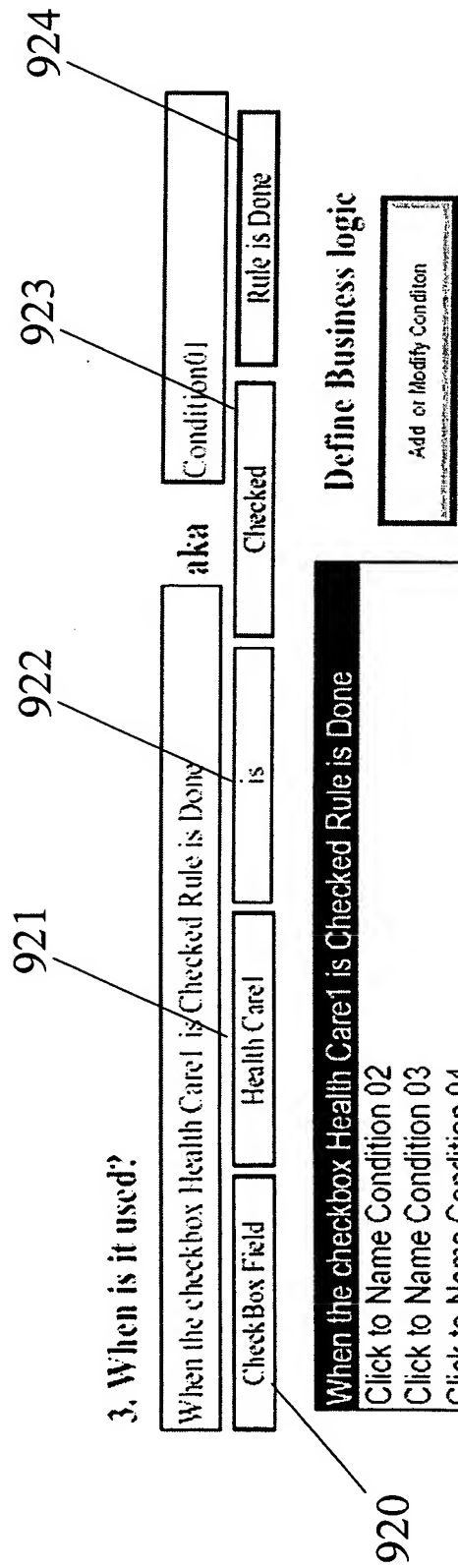


FIG. 56

904

930

Automatic Specification Documentation

Group to change Address, City State Zip. If Control Field Purpose I has the value Invitation Set Control Color to required Set Group Color to required Set Group Visibility to visible Set Group Value to same Else Set Control Color to optional And Set Group Color to optional And Set Group Visibility to visible And Set Group Value to same

Javascript Created

ObjectControls(TargetObjectArrayOnPrefix:

```
[ostrAddress,ostrCityStateZip],ControllingField,oehkPurposeI,TheControlValue:"Invitation",ControlColorIfTrue:"required",TargetColorIfTrue:"required",TargetDisplayIfTrue:"visible",TargetValueIfTrue:"same",ControlColorIfFalse:"optional",TargetColorIfFalse:"visible",TargetValueIfFalse:"same"])
```

931

FIG. 57

940

Step 7. Export Documentation

942

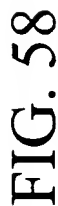
■ color as completed.

Document All Fields
Clear Documentation

Auto Create Field Labels
Get Tables

Export Documentation

941



10:40 AM



2002

Q This is to notify you of the district's action regarding educational program.

- | 1. | Description of the action: |
|-------------------------------------|---|
| <input checked="" type="checkbox"/> | Refusal to initiate an evaluation |
| <input type="checkbox"/> | Initial evaluation |
| <input type="checkbox"/> | Reevaluation |
| <input type="checkbox"/> | Expedited evaluation |
| <input type="checkbox"/> | Change of placement |
| <input type="checkbox"/> | Graduation from high school |
| <input type="checkbox"/> | IEP Issues/meetings where the parent is not present |
| <input type="checkbox"/> | Due process hearing, or an expedited hearing |
| <input type="checkbox"/> | Other (Describe action taken) |

2. An explanation of why the school district is taking the action;

3. A description of any other options the school district considered

6/29/2003

X Help with Why	
4GL Type:	Multi Line Text
Default Color:	Yellow
Label:	Why
Multiline:	Single
Name:	bdWhy
Size:	101
Type:	text
Visibility:	Visible

directed:



FIG. 60A

<u>FORM</u>	<u>FORM NAME / FIELD</u>	<u>Automated Compliance</u>	<u>WS/FCS</u>	<u>NC Page Directions</u>	<u>STATE PROCEDURES</u>	
					<u>MANUAL</u>	<u>FEDERAL REGISTER</u>
INVITATION	Modified day checkbox	X				
	Transition to school age checkbox	X			1501 Q	
	Purpose -change in educational placement	X			1507 E (2)	300.345 (B) (1) (i)
	Date	X		X		300.345
	Student invitation	X	X		1504 B (7)	300.345 (b) (2) (3)
	Time				1507 E (1)&(2)	300.345(b)(1)(i)
	Location				1507 E (2)	300.345(b)(1)(i)
	Attendees	X			1504 B	300.344

Appendix A # 7

FIG. 60B

FORM

IEP

DEC 4_1

FORM NAME / FIELD

Automated
Compliance

WS/FCS
Directions

STATE PROCEDURES
MANUAL

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REGISTER

IEP Duration Dates

X

.1507 C(7) & G(1)

300.347 (a) (6)

Student's Disability
of Disabilities

.1507 A
.1501 A

300.347 (a)
300.7 (b) & (c)

Specific Factors
- student strengths
- parent concerns
- behaviors impede

X

.1507 B(2)
.1507 B(1)(a)
.1507 B(1)(a)
.1507 B(2)(a)

300.346 (a) (2)
300.346 (a)(1)(i)
300.346 (a)(1)(i)
300.346 (a)(2)(i)
300.346 (c)

- limited English

X

.1507 B(2)(b)

300.346 (a)(2)(ii)

- use of Braille
- communication needs

X

.1507 B(2)(c)
.1507 B(2)(d)

300.346 (a)(2)(iii)
300.346 (a)(2)(iv)

- deaf or hard of hearing

X

.1507 B(2)(d)

300.346 (a)(2)(iv)

- assistive technology

X

.1507 B(2)(e)

300.346 (a)(2)(v)



FIG. 60C

FORM

FORM NAME / FIELD

Automated
Compliance

WS/FCS

NC Page
Directions

STATE PROCEDURES
MANUAL

FEDERAL
REGISTER

Other Factors

- Adaptive Physical Education

- 17 and informed of rights

- Transition

1501 B

1512 R

1507 C(8) & (9)

300.307

300.347(c)

300.347 (b)

DEC 4 Attachment

Special Factors to Be
Considered For a Student Who
Is Deaf or Hard of Hearing

- language and communications
skills

- opportunities for direct
communication with peers and
professional personnel in the
student's language communication
mode

- academic levels

- full range of needs, including
direct instruction in the student's
language and communication mode

X

1507 B(2)(d)

300.346 (a)(2)(iv)

1507 B(2)(d)

300.346 (a)(2)(iv)

1507 B(2)(d)

300.346 (a)(2)(iv)

1507 B(2)(d)

300.346 (a)(2)(iv)

1507 B(2)(d)

300.346 (a)(2)(iv)

DEC 4_2

Present Level of Performance
Specific Need

X

1507 C(1)

300.347 (a)(1)

Annual Goal

Objectives/Benchmarks

1507 C(2)

1507 C(2)

300.347 (a)(2)

300.347 (a)(2)

Measures of Progress

1507 (12)(a)

300.347 (a)(7)(i)



FIG. 60D



FORM	FORM NAME / FIELD	Automated Compliance	WSIFCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
DEC 4_3	Appropriate supplementary aids....				.1507 C(3)	300.347 (a)(3)
	Regular Program Participation				.1507 C(3)(b)	300.347 (a)(3)(ii)
	Testing Program	X	X		.1507 C(5) & (6)	300.347(a)(5)(i)(ii)
	Anticipated Frequency and Location of Special Education and Related Services				.1507 C(7)	300.347 (a)(6)
	- related services	X			.1501 L	300.24
DEC 4_4	Change in Placement checkbox	X				
	Modified Day checkbox	X				
	4 Period HS checkbox	X				
	Continuum of Alternative Placements	X	X	X	.1510 D	300.551
	The extent the student will be removed from regular peers				.1507 C(4)	300.347(a)(4) Appendix A #1

FIG. 60E

FORM

FORM NAME/ FIELD

Automated
Compliance

WS/ICS

NC Page
Directions

STATEPROCEDURES
MANUAL

FEDERAL
REGISTER

How and When parents will be
informed of student's progress
toward annual goals

X

X

.1507 (12)(b)

300.347(a)(7)(ii)

ESY

X

X

.1507 D

300.309

IEP Team Signatures

X

X

.1504 B

300.344

Transition

14+ years = statement

X

X

.1507 Q(8)

300.347(b)(1)

16+ years = plan

X

X

.1507 Q(9)

300.347(b)(2)



FIG. 60F

FORM	FORM NAME / FIELD	Automated Compliance	WS/FCFS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
Transition page 1	Transition Statement				1501 P	300.29
	Present level of Performance for Transition (preferences and interest)					
	Where and how info was obtained		X			
Transition Page 2	Desired Post-School Outcomes Standard Course of Study				1501 P	300.29
	Transition Plan (combined w/page 1)					
	Instruction				1501 P	300.29
	Employment Functional Vocational Evaluation				1501 P	300.29
	Community Experiences				1501 P	300.29
	Daily Living Skills/Adult Living				1501 P	300.29
	Related Services				1501 P	300.29
	- yes/no fields for each area		X			
	- services needed for each area				1507 C(8)	300.347(b)(1)
	- agency responsible for each area				1507 C(9)	300.347(b)(2)
BIP	Behavior Intervention Plan	X			1507 B(2)(a)	300.346 (c)
					1516 D(2)	Appendix A #38
PK Dec 4_3	For preschool children describe how the child is involved in a regular program:			X		300.347(a)(1)(ii) &(a)(2)(i)
	Anticipated Frequency and Location of Time				1507 C(7)	300.347(a)(6)
	Continuum of Alternative Placements				1510 F	300.551
	The extent to which the student will be removed from regular peers, if any.				1507 C(4)	300.347(a)(4) Appendix A #1



FIG. 60G



FORM	FORM NAME / FIELD	WSFCS Autism Compliance	WSFCS Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
PK DEC 4_4	ESY	X	X	.1507 D	300 309
	How and When parents will be informed of student's progress toward annual goals	X	X	.1507 Q(12)(b)	300 347(a)(7)(ii)
	EP Team Signatures	X	X	.1508 B	300 344
WSFCS Progress Report	Progress Report	X		.1507 Q(12) (b)	300 347(a)(7)(ii)
RE 1	Parent Contact Record Classroom Observation		X	BED .1505 D(1)(a)(i)(a) LD .1505 D(6)(b)(i)(a)	
RE 1(a)	Attendance/Grades Previous Testing Health Screening Vision/Hearing Screening		X	BED .1505 D(1)(a)(i)(a)(vi) LD .1505 D(6)(b)(i)(a)(vi)	
RE 1(b)	Intervention Strategies		X	BED .1505 D(1)(a)(i) LD .1505 D(6)(b)(i)	
RE 1(c)	Referral Committee Decision Referral Committee Members		X	BED .1505 D(1)(b)(i)(a)	

FIG. 60H

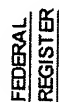
FORM	FORM NAME / FIELD	Automated Compliance	WS/FCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
RE 2	Parental Notification of Screening Procedures			X	.1501 M	
RE 2(a)	Parent Consent for Individual Screening(s)		X			
DEC 1 page 1&2 and PK DEC 1 page 1&2	Reason for Referral Strengths Needs	X			.1503	
	Referral Received Date	X		X	.1505 F(3)	
DEC 1_3 and PK DEC 1_3	Referral Committee Decision			X		
DEC 2	Consent for Evaluation/Reevaluation		X		.1505 A .1512 C(2) .1506 E	300.505
	Description of evaluation procedures Parent Absent button	X			.1505 A (1)	300.500(b)(1)(i)
DEC 3/RAT	Report for Additional Testing / Reevaluation Review		X		.1506 A & B	



FIG. 60I

FORM	FORM NAME / FIELD	Automated Compliance	WSIFCS	NC Page Directions	STATE PROCEDURES MANUAL	FEDERAL REGISTER
DEC 3 and PK DEC 3	Summary of Evaluation Results And Eligibility Determination Under Check Purpose Initial Evaluation	X			.1505 F(2)	300.534
	- Suspected Category	X			.1505 E	
	Reevaluation	X	X			
	- Suspected Category	X	X			
	Change in Category	X				
	- Suspected Category	X			.1505 E	
	- Current Category	X	X			
	Exit SLI (Articulation)					





DEC 3 (a)	Related Service	Additional Assessment	Exit PT, OT, Artic.	Eligibility Statement	300.535
Eligibility Report/Specific Learning Disabilities	X	X			
Ability Achievement Discrepancy	X				
Information Processing					
Substantial Learning Difficulties					
Relevant Medical Findings					
Effects of environmental, cultural, or economic disadvantage.					
Relevant Behaviors noted during observation	X				
Does the student have a learning disability?					

FIG. 60K

FORM
DEC 3 (b)

FORM NAME / FIELD

DEC 3 (b)

Eligibility Report/Behaviorally Emotionally Disabled
A student must show evidence of one or more of the following characteristics of the Definition of BED...

A student must meet all 5 criteria listed below in order to...

DEC 3 (c)

Eligibility Report/Other Health Impaired
Strength/Vitality/Alertness
Behaviors adversely affecting educational performance

DEC 5

Prior Written Notice
Description of the action proposed
Explanation of the action proposed
Options rejected
Description of evaluations and other relevant factors

DEC 6

Consent For Initial Placement For Special Education Services
Parent Absent button

DEC 7

Reevaluation Determination Form

Review of existing evaluation data
Summary of evaluations provided by parent
Summary of classroom assessments and observations
Summary of observations by teachers and service providers
Is additional data needed to determine:
- if the student continues to have a disability

FEDERAL REGISTER

NC Page
Directions

STATE PROCEDURES
MANUAL

Automated Compliance

WS/FCS

300.7(c)(4)

1501 A(2)

1505 D(1)(d)

300.7(c)(9)

1501 A(8)

300.7(c)(9)

1501 A(8)

300.7(c)(9)(ii)

300.503

1512 D

300.503 (b)(1)

1512 D (1) (a)

300.503 (b)(2)

1512 D (1)(b)

300.503 (b)(3)

1512 D (1)(c)

300.503

1512 D (1)(d)(e)

(b)(4)&(5)

1512 D (1)(f)

300.503 (b)(6)

300.503 (b)(7)

300.505

1512 C(2)

X

300.533

1506

300.533 (a)(1)

1506 A

300.533 (a)(1)(i)

1506 A(1)

300.533 (a)(1)(ii)

1506 A(2)

300.533 (a)(1)(iii)

1506 A(3)

300.533 (a)(2)(i)

1506



FIG. 60L



FORM	FORM NAME / FIELD	Automated	WS/FCS	NC Page	STATE PROCEDURES	FEDERAL
		Compliance		Directions	MANUAL	REGISTER
FBA	- Present levels of performance and needs				.1506	300.533 (a)(2)(ii)
	- Continued need for special education				.1506 C	300.533 (a)(2)(iii)
	- additions or modifications to special education				.1506	300.533 (a)(2)(iv)
	Determination of need for additional assessment				.1506 D	300.533(c)(d)
	Parent Request for additional assessment				.1506 E	300.533(d)(2)
MDW	Functional Behavior Assessment				.1516 D(2)	300.520(b)(1)
	Manifestation Determination Worksheet				.1516 F & G	300.523 300.524
	Questions for Discussion					
	- IEP was appropriate				.1516 F(4)(b)(i)	300.523 (c)(2)(i)
	- Placement was appropriate				.1516 F(4)(b)(i)	300.523 (c)(2)(i)
	- Supplemental aids and related services were provided				.1516 F(4)(b)(i)	300.523 (c)(2)(i)
	- Appropriate BIP was implemented				.1516 F(4)(b)(i)	300.523 (c)(2)(i)
	- Student's disability did not impair the ability to understand consequences of the behavior				.1516 F(4)(b)(ii)	300.523 (c)(2)(ii)
	- Student's disability did not impair the ability to control the behavior				.1516 F(4)(b)(iii)	300.523 (c)(2)(iii)
	- Misconduct is Not a Manifestation				.1516 G	300.524 (a)
	- Misconduct is a Manifestation				.1516 F	300.523 (d)